

09/980444

ISSUE SLIP STAPLE AREA (for additional cross reference)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SP</i>		
O.I.P.E. CLASSIFIER			12-12-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>SA</i>		1-12-02

INDEX OF CLAIMS

✓ Rejected
 II Allowed
 - (Through numeral) ... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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12	✓	✓	
13	✓	✓	
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Claim	Final	Original	Date
51	✓	✓	
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100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	
102	✓	✓	
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106	✓	✓	
107	✓	✓	
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143	✓	✓	
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146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COPY